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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/267,265 02/08/2001

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 02/28/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance Verified and Acknowledged	 Examiner's Signature Initials	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 5	TOTAL CLAIMS 2	INDEPENDENT CLAIMS 2
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TITLE  
 Rasterizer edge function optimizations

FILING FEE   RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
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435

☐ 1.18 Fees ( Issue )☐ Other \_\_\_\_\_☐ Credit